

## Purpose/Objectives

- Understand the role that culture plays in Nutrition assessment.
- Identify language and cultural differences that could act as barriers to providing respectful and effective nutrition care.
- Improve communication with families with different language and cultural backgrounds
- **Enable Clinicians to provide culturally-**



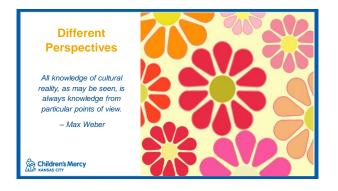


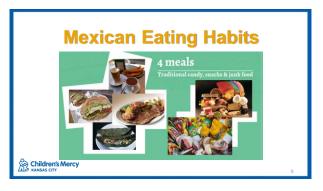
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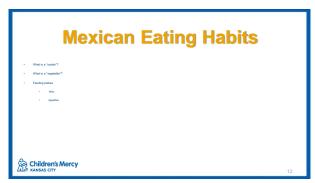


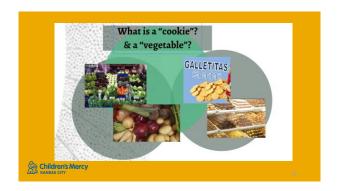














### What the Interpreter would like you to know · Meals are important to create identity and social and family identity.

- "Diet"
- · Fast food is luxury
- Food as medicine







## **Vegetables**



- Typically cooked in foods, not served separate.
- Lettuce salad with lemon juice and oil typically served with a meal



# **Somali Eating Habits**





- Traditionally drink fruity, sugary beverages with ice during the day (Tang, Koolaid, Lemonade, Sprite or Ginger ale)
- Breastfeed for 2 years or until child bites
- Infants traditionally get water. Start foods ~ 4 months
- Mom cooks 3 meals/day, even if she works

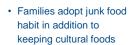
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## **Somali Eating Habits**







 Muslims do not eat pork – "allergy", read labels for this





#### What the Somali Interpreter would like you to know

- "Grits" specify made with milk or served with stew
- "Exercise" sounds like punishmen
- Help families understand weight, size, and health
- Teenagers may follow Ramadan. Kids do
  not but the are likely eating more at night.
- Always use vitamins in Somalia
- Some families think Periactin is a vitamin.
- Loud voices do not indicate aggression
- "Pancake" specify which kind

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